

HOMEOWNER VERIFICATION
for PLUMBING/GASPIPING PERMITS
DEPT OF BUILDING & SAFETY, 555 S 10TH ST, ROOM 203
LINCOLN/LANCASTER COUNTY, NE 68508

_____, being first duly sworn, says that:
Name: (please type or print) FIRST – M.I. - LAST

1. **I am the owner** of the single-family dwelling located at:

2. **I presently reside in the single-family dwelling**, or will reside there after construction is completed.

3. **I will install** and connect the Plumbing / Gas Piping for **myself, without compensation** or pay from, or to, any other person.

4. **I have submitted detailed plans** of the proposed Plumbing / Gas Piping installation, **as required** by the Plumbing Section, to the DEPT. OF BUILDING & SAFETY. I have **sufficient knowledge** of the Lincoln Plumbing Code requirements as stated in:

CHAPTER 24.05 [gas piping] and/or chapter 24.10 [plumbing]
OF THE LINCOLN MUNICIPAL CODE, to satisfactorily complete the project.

5. **I am aware the project** for which a Permit is issued **must be inspected and tested BEFORE Vents, Drainage, Pipes, or Water Lines are concealed; AND also must be inspected when** the installation of the Plumbing / Gas Piping **work is completed**. I will call the DEPT OF BUILDING & SAFETY.

24-hr Inspection Line (402) 441-8213 before 7:00 AM for same day inspection
and request the required inspections with the following information.

* **Permit #** AND [House #, Street Name, & Type of Street],

* **Date** you want the inspection, (AM or PM, if necessary), and

* **Access instructions** (if necessary, contact an inspector between 8:00 and 8:45 AM with any special information).

If I have any questions I will call the Plumbing Section (402) 411-7508

6. **I am aware** the Plumbing / Gas Piping **PERMIT is valid for 120 days from issuance**.

7. **I am aware** that *failure to submit satisfactory information or violating the above statements* is sufficient grounds to void a Permit already issued or to refuse issuance of a Plumbing / Gas Piping Permit to a homeowner.

8. **I am aware** that there is a **\$15.00 fee for each reinspection** required **because of non-compliance** with Lincoln Plumbing Code / Gas Piping Code **or if work is not complete** at the time inspection is called for

_____-_____-_____
Date

(____)_____-_____
Home Phone #

Signature of Homeowner

_____-_____-_____
Date Received

(____)_____-_____
Work Phone #

Counter Technician

-->COPY to Homeowner<--